





AT&T South Carolina 1600 Williams Street Suite 5470 Columbia, SC 29201 T: 803.401.2252 F: 803.771.4680 cc2283@att.com www.att.com

NA-2011-35-C

November 14, 2011

Ms. Jocelyn Boyd Chief Clerk/Administrator Public Service Commission of South Carolina 101 Executive Center Dr., Suite 100 Columbia, SC 29211

Re: SBC Internet Services, Inc. dba AT&T Internet Services request Numbering Resources Pursuant to *Administration of the North American Numbering Plan*, FCC Docket No. 99-200, Order, FCC 05-20 (released Feb. 1, 2005)

Dear Ms. Boyd:

Pursuant to the Federal Communications Commission's Docket No. 99-200, SBC Internet Services, Inc. dba AT&T Internet Services (ATTIS) hereby notifies this Commission of its intent to request numbering resources for the rate centers listed in the attached Part 1 and/or Part 1A. Under that order, we are required to provide this Commission with this notice before obtaining numbering resources from the North American Numbering Plan Administrator and/or the Pooling Administrator. In addition to filing the attached information with this Commission, we are also submitting this information to the Federal Communications Commission.

This is for your notification only. No action is required by the Commission.

Yours very truly,

**Executive Director** 

**Enclosure** 

CC: Dawn Hipp, ORS

<sup>&</sup>lt;sup>1</sup> *Id.* ¶ 9 (imposing 30-day notice requirement).

Tracking Number: \_\_\_\_ TBPAG Attachment 1 ATIS-0300066.at1

November 17, 2008

## Thousands-Block Application Form Part 1A

| Type of Application (check one):                                                                       | x New                       | Change'                       | Disconnect              |             |
|--------------------------------------------------------------------------------------------------------|-----------------------------|-------------------------------|-------------------------|-------------|
| GENER/                                                                                                 | AL APPLICATIO               | N INFORMATION                 |                         |             |
| 1.1 Contact Information:                                                                               |                             |                               |                         |             |
| Block Applicant:                                                                                       |                             |                               |                         |             |
| Company Name: SBC INTERNET SER                                                                         | VICES, INC. d/b             | <u>a at&amp;t internet si</u> | <u>ERVICES</u>          |             |
| Headquarters Address: 208 S. AKARD                                                                     | ST. City DALLA              | <u><b>S</b> State</u>         | <u>2</u>                |             |
| Contact Name: PATTY BERRIS                                                                             |                             |                               |                         |             |
| Contact Address 2600 CAMINO RAMO                                                                       |                             | MONState CA Zip 9             | <u>4583</u>             |             |
| Phone: <u>925-901-1934</u> Fax: <u>925-355-9</u>                                                       | <u> 268</u>                 |                               |                         |             |
| E-Mail: pb1986@att.com                                                                                 |                             |                               |                         |             |
| Pooling Administrator <sup>ii</sup> :                                                                  |                             |                               |                         |             |
| Contact Name:                                                                                          |                             |                               |                         |             |
| Contact Addrage:                                                                                       |                             |                               |                         |             |
|                                                                                                        | City                        | State                         | Zip                     |             |
| Pnone:                                                                                                 | гах                         |                               | -                       |             |
| E-Mail:                                                                                                |                             |                               | <b>\</b>                | 1.3         |
|                                                                                                        |                             |                               |                         |             |
| 1.2 General Information                                                                                |                             |                               | •                       |             |
|                                                                                                        |                             |                               |                         |             |
| Check one: No LRN needed X                                                                             | _ LRN needed <sup>iii</sup> |                               |                         |             |
|                                                                                                        |                             |                               | •                       |             |
| NPA: <u>864</u> LATA <u>430</u> OCN <sup>iv</sup> : <u>516C</u><br>Number of Thousands-Blocks Requesto |                             | y s OCN <u>0555</u>           | : 2 <sup>1</sup>        |             |
| Number of Thousands-Blocks Request                                                                     | eu. <u>1</u>                |                               | 41                      | i           |
| Switch Identification (Switching Entity/P                                                              | OI)": GNVLSCTI              | _X2X City or Wire Cer         | nter Name <u>iri</u>    |             |
| Rate Centervi: SPARTANBG Center S                                                                      | ub Zone:                    | <u> </u>                      | _                       |             |
|                                                                                                        |                             |                               |                         |             |
| 4.0. Datas                                                                                             |                             |                               |                         |             |
| 1.3 Dates                                                                                              |                             |                               |                         |             |
| Date of Application <sup>vii</sup> :                                                                   | Requested Blo               | ck Effective Dateviii:        |                         |             |
| Request Expedited Treatment? (See S                                                                    | ection 8.6) Yes             | s <u>X</u> No                 |                         |             |
| •                                                                                                      |                             |                               |                         |             |
| ☐ By selecting this checkbox, I acknowledge.                                                           | wledge that I am            | requesting the earliest       | possible effective date | the         |
| Administrator can grant. Please no                                                                     | te that this only a         | pplies to a reduction in      | the Administrator's pro | cessing     |
| time, however the request will still t                                                                 | be processed in t           | he order received.            |                         |             |
|                                                                                                        |                             |                               |                         |             |
| 1.4 Type of Service Provider Reques                                                                    | sting the Thousa            | nds-Block:                    |                         |             |
|                                                                                                        |                             |                               |                         |             |
| a) Type of Service Provider: <u>VOIP</u>                                                               | (LEC, IXC, CMR              | S, Other)                     |                         |             |
| b) Primary type of service Blocks to                                                                   | o be used for: <u>VO</u>    | <u>IP</u>                     |                         |             |
| c) Thousands-Block(s) (NXX-X) as                                                                       | signment prefere            | nce (optional)                |                         |             |
| d) Thousands-Block(s) (NXX-X) that e) If requesting a code for LRN pur                                 | at are undesirable          | e for this assignment, if     | allythe remains         | der of the  |
| e) If requesting a code for LRN pur<br>blocks will be given to the pool)                               | poses, indicate v           | MINON DIOCK(S) YOU WIII D     | e veehing (me remain    | 201 01 1110 |
| DIOCKS MIII DE BIAGH LO ME BOOI)                                                                       |                             |                               |                         |             |

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# Thousands-Block Application Form PART 1A

| 1.5 Type of Request                                                                                                                                                                                                                                                                                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Initial block for rate center: Yes, If Yes attach evidence of authorization and proof of capability to provide Service within 60 days                                                                                                                                                                                                                                                                        |
| Growth block for rate center: Yes $\underline{\mathbf{X}}$ , If Yes, attach months to exhaust worksheet                                                                                                                                                                                                                                                                                                      |
| By selecting this checkbox, I acknowledge that I am willing to accept a block in red and explicitly understand that the underlying CO code may not yet be activated in the PSTN and loaded in the NPAC on the block effective date.                                                                                                                                                                          |
| Type of Change (Mark <u>all</u> that apply):                                                                                                                                                                                                                                                                                                                                                                 |
| ☐ OCN: Intra-company <sup>ix</sup> ☐ Switching Id ☐ Part 1B ☐ OCN: Inter-company <sup>x</sup> ☐ Effective Date                                                                                                                                                                                                                                                                                               |
| Change block: Yes, If Yes, list NPA-NXX-X                                                                                                                                                                                                                                                                                                                                                                    |
| <ul> <li>a) Is this block Contaminated: Yes or No</li> <li>b) If Yes how many TNs are NOT available for assignment:</li> <li>c) Have all new Intra SP ports been completed in the NPAC: Yes or No</li> <li>d) Has this block been protected from further assignment: Yes or No</li> </ul>                                                                                                                    |
| Disconnect block: Yes, If Yes, list NPA-NXX-X                                                                                                                                                                                                                                                                                                                                                                |
| Remarks: GROWTH BLOCK.  I hereby certify that the above information requesting an NXX-X block is true and accurate to the best of my knowledge and that this application has been prepared in accordance with the Thousands-Block (NXX-X) Pooling Administration Guidelines ATIS-0300066 available on the ATIS web site (www.atis.org/inc) or by contacting inc@atis.org as of the date of this application. |
| PATTY BERRIS SR SPECIALIST- NETWORK PLANNING ENGR. NOVEMBER 1, 2011 Signature of Block Applicant Title Date                                                                                                                                                                                                                                                                                                  |

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### Thousands-Block Application Form Part 1A

### Instructions for filling out each Section of the Part 1A form:

- Section 1.1 Contact information requires that Service Providers supply under "Block Applicant" the company name, company headquarters address, a contact within the company, an address where the contact person may be reached, in addition to the correct phone, fax, and e-mail address. The Pooling Administrator section also requires the Service Provider to fill in the Pooling Administrator's name, address, phone, fax and e-mail.
- Section 1.2 Service Providers who need a thousands-block assignment or for a Location Routing Number (LRN) are required to fill in this section. If needed for an LRN, a CO Code Application needs to also be submitted to the PA. The Service Provider should supply the Numbering Plan Area (NPA); the Local Access Transport Area (LATA), which is a three-digit number that can be found in the Telcordia™ LERG™ Routing Guide. The Operating Company Number (OCN) assigned to the service provider and the OCN its parent company. An OCN is a four-character alphanumeric assigned by Telcordia™ Routing Administration (TRA). In addition, the number of thousands-blocks requested should be supplied. The Switch Identification as well as the city or wire center name, rate center, rate center sub zone, homing tandem and CLLI™ tandem of the facilities based provider<sup>xi</sup>. Explanations of these terms may be found in the footnotes.
- Section 1.3 The date the Service Provider completes the application should be entered in this section, as well as the Effective Date of the requested thousands-block.
- Section 1.4 Service Providers should indicate their type, e.g., local exchange carrier, competitive local exchange carrier, interexchange carrier, CMRS. The also indicate the primary type of business in which the numbering resource is to be used. Service Providers also may indicate their preference for a particular thousands-block, e.g., 321-9XXX, or indicate any thousands-blocks that may be undesirable, e.g., 321-6XXX.
- Section 1.5 Service Providers indicate the type of request. Initial requests are for first applications for thousands-blocks in a rate center, growth for additional thousands-blocks in a rate center in which the applicant already has numbering resources, and provide the required evidence as ordered by the FCC.
- Section 1.6 Service Providers must indicate the updated/current information in regards to contaminated TNs on the block they are returning to the pool. Blocks with over 10% contamination (101 TNs or more) shall not be returned to the pool unless they meet criteria outlined in section 9.1.2 of these Guidelines. If the block being returned is over 10% contaminated the PA shall seek a new block holder. If question c and/or d have a response of No, the request for return shall be denied.

The thousands-block applicant certifies veracity of this form by signing their name, and providing their title and date.

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### Thousands-Block Application Form Part 1A

#### Footnotes:

i Identify the type of change(s) in Section 1.5.

<sup>&</sup>quot; The Pool Administrator is available to assist in completing these forms.

iii A CO Code application will also need to be submitted to the PA

Operating Company Number (OCN) assignments must uniquely identify the applicant. Relative to CO Code assignments, NECA-assigned Company Codes may be used as OCNs. Companies with no prior CO Code or Company Code assignments should contact NECA (800 524-1020) to be assigned a Company Code(s). Since multiple OCNs and/or Company Codes may be associated with a given company, companies with prior assignments should direct questions regarding appropriate OCN usage to (TRA) (732-699-6700).

This is an eleven-character descriptor of the switch provided by the owning entity for the purpose of routing calls. This is the 11 character CLLI<sup>TM</sup> code of the switch /POI.

vi Rate Center name must be a tariffed Rate Center.

vii Acknowledgment and indication of disposition of this application will be provided to applicant within seven calendar days from the date of receipt of this application. An incomplete form may result in delays in processing this request.

viii Please ensure that the NPA-NXX of the LRN to be associated with this block(s) is/will be active in the PSTN prior to the effective date of the block(s).

ix Select if you are the current Block Holder

<sup>\*</sup> Select if you are not the current Block Holder

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#### **CONTAINS CONFIDENTIAL COMMERCIAL INFORMATION**

#### ATIS-0300066.ap3 - Appendix 3

June 6, 2008

## MONTHS TO EXHAUST and UTILIZATION CERTIFICATION WORKSHEET – TN Level<sup>i</sup> (Thousands-Block Number Pooling Growth Block Request)

| Date: <u>11/01/2011</u> OC                                                                                                                                                |                     |                                 |                                                              |                                                  |                 |                    |                              |               |             |                  |              |              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|---------------------------------|--------------------------------------------------------------|--------------------------------------------------|-----------------|--------------------|------------------------------|---------------|-------------|------------------|--------------|--------------|
| <u>SERVICES</u>                                                                                                                                                           |                     |                                 |                                                              |                                                  |                 |                    |                              |               |             |                  |              |              |
| Rate Center: SPAR                                                                                                                                                         | TANBG               |                                 |                                                              |                                                  |                 |                    |                              |               |             |                  |              |              |
| List all Codes NPA(s                                                                                                                                                      | )-NXXs a            | and Blo                         | cks NP                                                       | A(s)-NX                                          | (X-X(s):        |                    |                              |               |             |                  |              |              |
| Name of Block Applie                                                                                                                                                      | cant: <u>PA</u>     | TTY BEI                         | RRIS S                                                       | ignatur                                          | e: <u>PATTY</u> | BERRIS             | <u>L</u>                     |               |             |                  |              |              |
| Title: <u>SR SPECIALIS</u><br>E-Mail: <u>pb1986@att.</u>                                                                                                                  |                     | ORK PLA                         | ANNING                                                       | ENGR.                                            | Telepho         | ne No.:            | 925-901-                     | <u>1934</u> F | AX No.:     | 9 <u>25-355-</u> | <u>9268</u>  |              |
| A. Available Numbe                                                                                                                                                        | rs:                 |                                 |                                                              |                                                  |                 |                    |                              |               |             |                  |              |              |
| B. Assigned Numbe                                                                                                                                                         | ers:                |                                 |                                                              |                                                  |                 |                    |                              |               |             |                  |              |              |
| C. Total Numbering                                                                                                                                                        | Resource            | ces:                            |                                                              |                                                  |                 |                    |                              |               |             |                  |              |              |
| D. Quantity of number Utilization calculation <sup>ii</sup>                                                                                                               | : 🛮                 |                                 |                                                              | days (in                                         | crements        | of 1,000           | or 10,000                    | )) and exc    | cluded fro  | m the            |              |              |
| Utilization calculation <sup>ii</sup> List excluded Co                                                                                                                    | : 🛮                 |                                 |                                                              | Month #4                                         | Month<br>#5     | of 1,000  Month #6 | or 10,000<br><br>Month<br>#7 | Month<br>#8   | Month<br>#9 | Month<br>#10     | Month<br>#11 | Month<br>#12 |
| Utilization calculation <sup>ii</sup> List excluded Co                                                                                                                    | : de(s) or          | Block(s                         | S):  Month                                                   | Month                                            | Month           | Month              | —<br>Month                   | Month         | Month       | Month            |              |              |
| Utilization calculationii                                                                                                                                                 | : de(s) or          | Block(s                         | S):  Month                                                   | Month                                            | Month           | Month              | —<br>Month                   | Month         | Month       | Month            |              |              |
| Utilization calculation <sup>ii</sup> List excluded Co Growth History – Previous 6 months <sup>iii</sup>                                                                  | Month               | Month<br>#2                     | Month #3                                                     | Month<br>#4                                      | Month<br>#5     | Month<br>#6        | —<br>Month                   | Month         | Month       | Month            |              |              |
| Utilization calculation <sup>ii</sup> List excluded Co Growth History – Previous 6 nonths <sup>iii</sup> Forecast – Next 12 months <sup>iv</sup> Average Monthly Forecast | Month<br>#1         | Month #2                        | Month #3  -6 (Part F                                         | Month<br>#4                                      | Month<br>#5     | Month<br>#6        | Month<br>#7                  | Month         | Month       | Month            |              |              |
| Utilization calculation <sup>ii</sup> List excluded Co Growth History – Previous 6 months <sup>iii</sup> Forecast – Next 12 months <sup>iv</sup>                          | Month #1  (Sum of m | Month #2  months #1-  Numbers / | Month #3  -6 (Part F  Available  Average mbers (B g Resource | Month #4  above) d for Assign Monthly  — Exclude | Month<br>#5     | Month<br>#6        | Month<br>#7                  | Month<br>#8   | Month       | Month            |              |              |

E.

F.

G.

H.

١.

i A copy of this worksheet is required to be submitted to the Pooling Administrator when requesting additional numbering resources in a rate center. For auditing purposes, the applicant must retain a copy of this document.

Quantity of numbers activated in the past 90 days is based on blocks and/or codes received from the administrator and shall be reported in increments of 1,000 or 10,000 TNs (e. g.: 2 blocks received=2,000 and 1 code received =10,000).

iii Net change in TNs no longer available for assignment in each previous month, starting with the most distant month as Month #1, and Month #6 as the current month.

iv Forecast of TNs needed in each following month, starting with the most recent month as Month #1.

v To be assigned an additional thousands-block (NXX-X) for growth, "Months to Exhaust" must be less than or equal to 6 months. (FCC 00-104, § 52.15 (g) (3) (iii)).

 $<sup>^{</sup>m vi}$  Newly acquired numbers may be excluded from the Utilization calculation (FCC 00104, section 52.15 (g)(3)(ii))